



MONTGOMERY COUNTY  
DEPARTMENT OF HOUSING AND COMMUNITY AFFAIRS



License No. \_\_\_\_\_

Licensing and Registration • 100 Maryland Avenue Suite 260 • Rockville, Maryland 20850  
Telephone 240-777-3666 • Fax 240-777-3699 • TTD 240-777-3679  
www.montgomerycountymd.gov/dhca

**RENTAL HOUSING LICENSE APPLICATION**  
**SINGLE FAMILY AND CONDOMINIUM**

**IMPORTANT INFORMATION** (Read Carefully):

- Incomplete applications will delay the license.
- Application **MUST** be signed by owner.
- Payment: Check or Money Order only
- Payable to: Montgomery County MD

**Fiscal Year: July 1 to June 30**

**FEES: (Fees are annual, due by July 31)**

**\$98.00**

- ☐ Single Family
- ☐ Townhouse/Back to Back
- ☐ Duplex/Quadraplex

**\$56.00**

- ☐ Garden Style Condo
- ☐ High Rise Style Condo
- ☐ Piggyback Townhouse

FEES ARE NOT PRORATED

**OFFICE USE ONLY**

Entered By \_\_\_\_\_

Deposit By \_\_\_\_\_

☐ Please email me license confirmation      Email Address: \_\_\_\_\_

**RENTAL PROPERTY INFORMATION:**

Name of Community Association \_\_\_\_\_ Year Built \_\_\_\_\_

Rental Street Address \_\_\_\_\_ Unit # \_\_\_\_\_

City \_\_\_\_\_ **MD** \_\_\_\_\_ Zip Code \_\_\_\_\_ Recent Purchase (date) \_\_\_\_\_

Start Date of Rental \_\_\_\_\_ Rent \$ \_\_\_\_\_ # of Occupants \_\_\_\_\_

# of Kitchens \_\_\_\_\_ # of Bedrooms \_\_\_\_\_ # of Basement Bedrooms \_\_\_\_\_

Relative Occupied? YES ☐ NO ☐      Circle Relationship: Spouse, Sibling, Parent, Child, Grandparent, Grandchild

If **YES**, Do Not Pay for License. You do not need to pay the License Fee.

**OWNER INFORMATION:**      \*\*\*Sole Ownership ☐      Trust ☐      \*\*\*Partnership/LLC ☐      Corporation ☐

Primary Owner (Salutation) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Work Phone # \_\_\_\_\_ Home Phone # \_\_\_\_\_ \*Cellular Phone # \_\_\_\_\_

Fax # \_\_\_\_\_ Email Address \_\_\_\_\_

\*\*\*Must provide information for all **owners** and/or **partners/members** holding 10% or more interest. Please provide on separate sheet\*\*\*

**CORPORATION INFORMATION:**

Corporation Name \_\_\_\_\_

Executive's Name: \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Office Phone # \_\_\_\_\_ Cellular Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Email Address \_\_\_\_\_

**AGENT INFORMATION: Agent/Management ☐**

NOTE: Resident Agent is required for Corporate Ownership.

**Resident/Legal Agent ☐**

Legal Agent required if owner does not live in Maryland.

Agent/Management Name \_\_\_\_\_ (Renewals will be mailed to this Agent)

Company Name: \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Work Phone# \_\_\_\_\_ Cellular Phone # \_\_\_\_\_ Fax Phone # \_\_\_\_\_

Email Address \_\_\_\_\_

\* \* \* \* \*

**\*Must be a Maryland Resident – Not the Tenant**

Resident/Legal Agent Name \_\_\_\_\_

Company Name: \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State MD Zip Code \_\_\_\_\_

Work Phone# \_\_\_\_\_ Cellular Phone # \_\_\_\_\_ Fax Phone # \_\_\_\_\_

Email Address \_\_\_\_\_

Legal Agent's Signature Required \_\_\_\_\_ Date \_\_\_\_\_

**MARYLAND DEPARTMENT OF ENVIRONMENT  
LEAD POISONING PREVENTION**

Maryland State law requires all owners renting residential properties to register the rental property with MDE. If the property was built before January 1, 1950, it is required to be tested for lead paint. [Statutory requirements of *Article 24, Political Subdivisions, 19-103*]

1. Is the property built before January 1, 1950? YES ☐ NO ☐

**If answer to question #1 is NO, do not answer questions 2, 3, & 4.**

**If the answer is YES, please complete questions.**

2. Is this property registered with MDE? YES ☐ NO ☐  
Tracking #: \_\_\_\_\_

**If NO, contact MDE 1-800-633-6101 to register.**

3. Is the registration current? YES ☐ NO ☐

4. What is the Lead Inspection Certificate # for current tenancy: \_\_\_\_\_

Mail a photocopy of lead inspection certificate with application. For more information on requirements for obtaining your lead inspection certificate, contact Maryland Department of Environment at 1-800-633-6101 ext. 4199 or 410-537-4199 or [www.mde.state.md.us/lead](http://www.mde.state.md.us/lead).

**AUTHORIZED SIGNATURE OF APPLICATION LICENSE:**

- ☐ By my signing this application, I am the owner or authorized to sign on behalf of the owner. I understand that falsifying information can result in having this rental license application denied and the property will not be licensed to rent. I affirm under penalty of perjury that the information on this application is true to the best of my knowledge and belief. I also understand that if there are changes in property ownership, owner address, or agent/contact information that I must notify MC/DHCA Licensing and Registration within 10 day of the change. I also understand penalty can be assessed in a civil citation of \$500 if the rental property is not licensed.

**X** \_\_\_\_\_ Date \_\_\_\_\_  
**Authorized Signature**

**Print or Type Name of Person Signing**

**Please note:** Montgomery County Government now uses the services of CheckAgain – Enhanced Check Management Services. If your check is returned unpaid, your account will be debited electronically for the original check amount and electronically or via paper for the state's maximum allowable service fee. Payment by check constitutes authorization of these transactions. You may revoke your authorization by calling (800)666-5222 ext. 2 to arrange payment for any outstanding checks and service fees due. [www.checkagain.com](http://www.checkagain.com)